

SERIAL NUMBER	FILING DATE	CLASS	GROUP ART UNIT	ATTORNEY DOCKET NO.
09/306,448	05/06/99	623	3736	

APPLICANT

WARREN P. WILLIAMSON IV, LOVELAND, OH; PAUL A. SPENCE, LOUISVILLE, KY;
GEORGE T. CHISTAKIS, TORONTO, CANADA; MARK ORTIZ, MILGORD, OH.

****CONTINUING DOMESTIC DATA*******

VERIFIED THIS APPLN IS A CIP OF 08/964,026 11/04/97 *ABN*
PPF WHICH IS A CIP OF 08/802,948 02/21/97 *6,042,607*
 WHICH IS A CIP OF 08/606,343 02/23/96 PAT 5,716,370

****371 (NAT'L STAGE) DATA*******

VERIFIED

PPF

****FOREIGN APPLICATIONS*******

VERIFIED

PPF

IF REQUIRED, FOREIGN FILING LICENSE GRANTED 05/26/99 ** SMALL ENTITY **

Foreign Priority claimed 35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> yes <input type="checkbox"/> no	<input type="checkbox"/> Met after Allowance	STATE OR COUNTRY OH	SHEETS DRAWING 44	TOTAL CLAIMS 20	INDEPENDENT CLAIMS 11
Verified and Acknowledged	Examiner's Initials <i>PPF</i> Initials					

ADDRESS	TERRY M GERSTEIN 1015 SALT MEADOW LANE MCLEAN VA 22101
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TITLE	MEANS AND METHOD OF REPLACING A HEART VALVE IN A MINIMALLY INVASIVE MANNER
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FILING FEE RECEIVED \$692	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for the following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.18 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit: _____
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